DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: PLEASURES OF HOME INC (0010636)

Address: 12286 120TH AVENUE, CHIPPEWA FALLS, WI 54729

License Status: REGULAR

Licensed/Certified/Registered 07/16/2004

Regional Office: WESTERN REGION (EAU CLAIRE), (715) 836-4752

Survey History			
Survey ID: 0097156 Results: NO STATEME	End Date: 06/07/2006 ENT OF DEFICIENCY ISSU	Type: ABBREVIA ED	ATED Purpose: SURVEY
Survey ID: 0095376 Results: NO STATEME	End Date: 08/16/2005 ENT OF DEFICIENCY ISSU	Type: OTHER	Purpose: COMPLAINT
Survey ID: 0093691 Results: NO STATEME	End Date: 10/20/2004 ENT OF DEFICIENCY ISSU	Type: OTHER	Purpose: COMPLAINT
Survey ID: 0092900 Results: LICENSE/CER	End Date: 07/13/2004	Type: INITIAL	Purpose: SURVEY

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History

Date Complaint Received: 07/22/2005 Date Investigation Completed: 08/16/2005

Subject Area(s) Result SOD #

RESIDENT RIGHTS NOT SUBSTANTIATED

Date Complaint Received: 10/15/2004 Date Investigation Completed: 11/03/2004

Subject Area(s) Result SOD #

RESIDENT RIGHTS NOT SUBSTANTIATED RESIDENT BEHAVIOR/FACILITY PRACTICE NOT SUBSTANTIATED

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